

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
FEC MAILCENTER

2023 MAR 17 PM 12:08
Office Use Only

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Anita Belle for President

ADDRESS (number and street)

P.O. Box 21008

☒

(Check if address
is changed)

Detroit

CITY ▲

MI

STATE ▲

48221

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒

(Check if address
is changed)

anitabelleforpresident@gmail.com

Optional Second E-Mail Address

hello@anitabelleforpresident.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☒

(Check if address
is changed)

http://anitabelleforpresident.com

2. DATE

03

15

2023

3. FEC IDENTIFICATION NUMBER ►

C C00701466

4. IS THIS STATEMENT

☐

NEW (N)

OR

☒

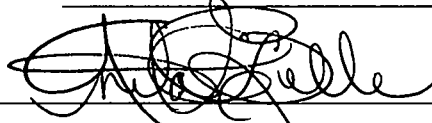
AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Anita Belle

Signature of Treasurer



Date

03

15

2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 03/2022)

5. TYPE OF COMMITTEE:

Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of
Candidate

Anita Eileen Belle

Candidate
Party Affiliation

GRE

Office
Sought:☐

House

☐

Senate

☒

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate**Party Committee:**

- (d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

☐

Corporation

☐

Corporation w/o Capital Stock

☐

Labor Organization

☐

Membership Organization

☐

Trade Association

☐

Cooperative

☐

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

☐

In addition, this committee is a Lobbyist/Registrant PAC.

☐

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

- (g) ☐ This committee is an independent expenditure-only political committee (Super PAC).

☐

In addition, this committee is a Lobbyist/Registrant PAC.

- (h) ☐ This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

☐

In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

- (i) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (j) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

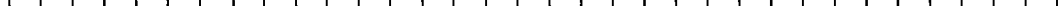
Committees Participating in Joint Fundraiser

1. 2.

2025 OCT 17 PM 3:00 00438768

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

**Mailing Address**

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☐ Connected Organization ☐ Affiliated Organization ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Anita Belle

Mailing Address

18437 Pennington Dr

A horizontal number line with 20 tick marks, labeled from 0 to 19. The line is used for plotting data points.

Detroit

| M)

| 48221

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

| Treasuren

Telephone number

313

740

4644

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name

of Treasurer

Anita Belle

Mailing Address

18437 Pennington Dr

A horizontal number line with 20 tick marks, labeled from 0 to 19. The line is used for plotting the data points from the frequency table.

Detroit

| M

| 48221

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasure

Telephone number

313

740

4644

Full Name of
Designated
Agent

Anita Belle

Mailing Address

18437 Pennington Dr

Detroit

CITY ▲

MI

STATE ▲

48221

ZIP CODE ▲

Title or Position ▼

Candidate

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Liberty Bank

Mailing Address

9108 Woodward

Detroit

CITY ▲

MI

STATE ▲

48221

ZIP CODE ▲

Name of Bank, Depository, etc.

First Independence Bank

Mailing Address

7020 W. 7 Mile

Detroit

CITY ▲

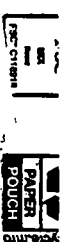
MI

STATE ▲

48221

ZIP CODE ▲

PRESS FIRMLY TO SEAL



PRESS FIRMLY TO SEAL



RDC 07

20463

48221
MAR 15 23
AMOUNT
\$28.75
R2304N116777-90

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Arta Dalia
18437 Farmington Dr
Detroit, MI 48221

DELIVERY OPTIONS (Customer Use Only)

- ☐ SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: (1) Requires the addressee's signature; OR (2) Purchases additional insurance; OR (3) Purchases COD service; OR (4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.
- ☐ No Saturday Delivery (delivered next business day)
- ☐ Sunday/Holiday Delivery Required (additional fee, where available)
- ☐ 10:30 AM Delivery Required (additional fee, where available)
- ☐ Trade to USPS.com or local Post Office for availability

TO: (PLEASE PRINT) PHONE (800) 424-9530

Federal Election Commission
1050 First St. NE
Washington, DC
200463

- ☐ For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
- ☐ \$100.00 Insurance included.

PEEL FROM THIS CORNER

PAYMENT BY ACCOUNT (if applicable)

USPS® Corporate Acct. No.

Federal Agency Acct. No. or Postal Service® Acct. No.

ORIGIN (POSTAL SERVICE USE ONLY)

☒ 1-Day ☐ 2-Day ☐ Military ☐ DPO

PO ZIP Code 48221 Scheduled Delivery Date (MM/DD/YY) 3-16 Postage \$ 28.75

Date Accepted (MM/DD/YY) 3-15-23 Scheduled Delivery Time 10:30 AM - 12:00 PM Insurance Fee \$ COD Fee \$

Time Accepted 3:24 PM Return Receipt Fee \$ Live Animal Transportation Fee \$

Special Handling/Fragile Sunday/Holiday Premium Fee \$ Total Postage & Fees \$ 28.75

Weight \$ Flat Rate Acceptance Employee Initials \$

Qty. 2 ozs. 86

DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YY) Time Employee Signature

Delivery Attempt (MM/DD/YY) Time Employee Signature

Delivery Attempt (MM/DD/YY) Time Employee Signature

LABEL 11-B, MARCH 2019

PSN 7500-02-000-9936



UNITED STATES POSTAL SERVICE



PS10001000006

EP13F May 2020
OD: 12 1/2 x 9 1/2

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input checked="" type="checkbox"/> USPS Priority Mail Express	Postmarked 3/15/23
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
WDE PREPARER (3/2015)	3/17/23 DATE PREPARED

20230317 17:00:00